

Rec'd 10/24/2014  
11:35 AM SK



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

### CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

3. This Statement covers From: 08/26/14 to 10/20/14

1. Committee I.D. Number  
**150695**

2. Committee Name  
**Friends of Randy Badgerow**

4. Candidate Last Name First Name M.I.  
**Badgerow Randall L**

4a. Office Sought Including District # or Community Served (if applicable)  
**District 5 Bay County Commissioner**

4b. County of Residence **BAY**

5. Committee's Mailing Address  
**613 30th St**

Area Code and Phone \_\_\_\_\_  
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

6. Treasurer's Name & Residential Address  
**Randy Badgerow  
613 30th St  
Bay City, MI 48708**

Area Code & Phone \_\_\_\_\_

7. Treasurer's Business Address  
**509 Center Ave  
Bay City, MI 48708**

Area Code and Phone **(989) 893-1165**

8. Designated Record keeper's Name and Mailing Address (if the committee has a Designated Record keeper)

Area Code and Phone **(989) 316-5160**

9. TYPE OF STATEMENT

9a.  Pre-Election OR 9b.  Post-Election

Pre-Election or Post-Election Statement relates to:

Primary  
 General  
 Convention  
 Special  
 School  
 Caucus

Date of Election, Convention or Caucus  
November 4, 2014

Required ONLY if candidate is not on the ballot for the current year:

July Quarterly  
 October Quarterly

9c.  Annual Statement (\_\_\_\_\_) Coverage Year

9d.  Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)

9e. Dissolution of Candidate Committee

By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.

Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Effective date of dissolution \_\_\_\_\_

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record keeper Randy Badgerow Signature Randy Badgerow Date 10/24/14

Candidate Randy Badgerow Signature Randy Badgerow Date 10/24/14

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1. Committee I.D. Number 150695

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name Friends of Randy Badgerow

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>1,486.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$1,486.00</u>	(18.) \$ <u>\$1,486.00</u>
<b>4. Other Receipts (Schedule 1A -1, Column 6)</b>	(4.) \$ <u>\$0.00</u>	(19.) \$ <u>\$0.00</u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ <u>\$1,486.00</u>	(20.) \$ <u>\$1,486.00</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
<b>6. In-Kind Contributions (Schedule 1-IK, Column 7)</b>	(6.) \$ <u>\$0.00</u>	(21.) \$ <u>\$0.00</u>
<b>7. In-Kind Expenditures (Schedule 1B-IK, Column 6)</b>	(7.) \$ <u></u>	(22.) \$ <u>\$0.00</u>
<b>EXPENDITURES</b>		
<b>8. Expenditures</b>		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$1,509.09</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>\$0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>\$0.00</u>	
<b>9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)</b>	(9.) \$ <u>\$1,509.09</u>	(23.) \$ <u>\$1,509.09</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)		
<b>10. Disbursements</b>		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>\$0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>\$0.00</u>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$ <u>\$0.00</u>	(24.) \$ <u>\$0.00</u>
<b>DEBTS AND OBLIGATIONS</b>		
<b>12. Debts and Obligations</b>		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$115.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>\$0.00</u>	
<b>BALANCE STATEMENT</b>		
<b>13. Ending Balance of last report filed</b> (Enter zero if no previous reports have been filed.)	(13.) \$ <u>\$82.28</u>	
<b>14. Amount received during reporting period</b> (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$1,486.00</u>	
<b>15. SUBTOTAL Add lines 13 and 14</b>	(15.) = \$ <u>\$1,568.28</u>	
<b>16. Amount expended during reporting period</b> (Add lines 9 and 11)	(16.) - \$ <u>\$1,509.09</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>\$59.19</u>	



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150695  
2. Committee Name Friends of Randy Badgerow

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>07/29/14</u>	
Name & Address: <b>Virley E. Herbolsheimer</b> 3068 E. Hotchkiss Rd Bay City, MI 48706-3427		\$ <u>5</u>	\$ <u>5</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/10/14</u>	
Name & Address: <b>Bay County Republican Party</b> P.O. Box 426 Bay City, MI 48707-0426		\$ <u>1000</u>	\$ <u>1000</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/14</u>	
Name & Address: <b>Don &amp; Judy Heppner</b> 3400 Bedford Lane Bay City, MI 48706		\$ <u>40</u>	\$ <u>40</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/16/14</u>	
Name & Address: <b>Vaughn Begick</b> 5353 Lorraine Ct Bay City, MI 48706		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> <b>Fund Raiser</b>		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$1,095.00**

Enter this total on line 3a of Summary Page



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150695  
2. Committee Name Friends of Randy Badgerow

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/16/14</u> Name & Address: <b>James &amp; Donna Reichard</b> <b>6946 Mackinaw</b> <b>Bay City, MI 48706</b> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>36</u>	\$ <u>36</u>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/14</u> Name & Address: <b>Ronald Campbell</b> <b>The Bentwood Dr</b> <b>Bay City, MI 48706</b> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>20</u>	\$ <u>20</u>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/16/14</u> Name & Address: <b>Kirby &amp; Jackie Spicer</b> <b>2211 E. Beaver Rd</b> <b>Kawkawlin, MI 48631</b> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>36</u>	\$ <u>36</u>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/16/14</u> Name & Address: <b>Steve Simmett</b> <b>Glendale</b> <b>Saginaw, MI 48604</b> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>20</u>	\$ <u>20</u>
<a href="#">Click Here for Memo Itemization</a>		

Page Subtotal **\$112.00**

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150695  
2. Committee Name Friends of Randy Badgerow

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/16/14</u> Name & Address: <b>Brandon &amp; Chelsey DeFrain</b> 314 Van Etten St Pinconning, MI 48650		\$ <u>36</u>	\$ <u>36</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/14</u> Name & Address: <b>Joan Christlew</b> 3300 Paulon Dr Bay City, MI 48706		\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/16/14</u> Name & Address: <b>Darlene &amp; Carlos Jaime</b> 2846 E. Kawkawlin River Dr Kawkawlin, MI 48631		\$ <u>36</u>	\$ <u>36</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/16/14</u> Name & Address: <b>Joe &amp; Mary Sylvester</b> 5874 <i>Cole Rd</i> Saginaw, MI 48601		\$ <u>20</u>	\$ <u>20</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$112.00

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150695  
2. Committee Name Friends of Randy Badgerow

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/16/14</u> Name & Address: <b>Peggy Burns</b> 901 Murphy St St Bay City, MI 48706		\$ <u>30</u>	\$ <u>30</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/10/14</u> Name & Address: <b>Susan Mosher</b> 2113 Second St Bay City, MI 48708		\$ <u>27</u>	\$ <u>27</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/24/14</u> Name & Address: <b>Matthew Lance</b> 306 S. Johnson St Bay City, MI 48708		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/16/14</u> Name & Address: <b>Joseph Davis</b> 909 N. Wenona St Bay City, MI 48706		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$107.00**

Grand Total of All Schedules 1A  
(Complete on last page of Schedule)

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150695  
2. Committee Name Friends of Randy Badgerow

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/25/14</u> Name & Address: <b>Randy &amp; Susan Badgerow</b> <b>613 30th St</b> <b>Bay City, MI 48708</b> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ <u>50</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/06/14</u> Name & Address: <b>Esther M. Neumeyer/ Ann Schroeder</b> <b>7195 Three Mile Rd</b> <b>Bay City, MI 48706</b> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>10</u>	\$ <u>10</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____ Name & Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ _____	\$ _____  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/16/14</u> Name & Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ _____	\$ _____  <a href="#">Click Here for Memo Itemization</a>

Page Subtotal **\$60.00**

Grand Total of All Schedules 1A  
(Complete on last page of Schedule) **\$1,486.00**

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150695  
2. Committee Name Friends of Randy Badgerow

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <b>Cartridge World</b>  Address 206 N. Euclid Ave Bay City, MI 48706  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Ink cartridges</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/28/14</u> Date	<u>\$ 40.27</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #2 Name <b>Bay City Democrat Press</b>  Address 309 Ninth St Bay City, MI 48708  <input type="checkbox"/> Fund Raiser	Purpose: <u>Signs and Literature for campaign</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/12/14</u> Date	<u>\$ 842.17</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #3 Name <b>Sam's Club</b>  Address 5656 Bay Rd Saginaw, MI 48604  <input type="checkbox"/> Fund Raiser	Purpose: <u>Misc. (eating utensils) for fund raiser</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/14/14</u> Date	<u>\$ 70.18</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #4 Name <b>USPS</b>  Address Main Branch Bay City, MI 48708  <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage for mailings</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/15/14</u> Date	<u>\$ 34</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #5 Name <b>Bay County Clerk</b>  Address 515 Center Ave Bay City, MI 48708  <input type="checkbox"/> Fund Raiser	Purpose: <u>Walking list</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/17/14</u> Date	<u>\$ 10</u>  <a href="#">Click Here for Memo Itemization Type</a>

Subtotal this page **\$996.62**

Grand Total of all Schedules 1B  
(Complete on last page of Schedule)

Enter this total  
on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150695  
2. Committee Name Friends of Randy Badgerow

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <b>Cartridge World</b>  Address 1007 Washington Ave Bay City, MI 48708  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Catering for fund raiser</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/28/14</u> Date	<u>\$ 228.00</u>
Expenditure #2 Name <b>Bay City Democrat Press</b>  Address 309 Ninth St Bay City, MI 48708  <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing of postcards</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/22/14</u> Date	<u>\$ 182.47</u>
Expenditure #3 Name <b>USPS</b>  Address Main Branch Bay City, MI 48708  <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage for mailings</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/22/14</u> Date	<u>\$ 34.00</u>
Expenditure #4 Name <b>USPS</b>  Address Main Branch Bay City, MI 48708  <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage for mailings</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/29/14</u> Date	<u>\$ 68</u>
Expenditure #5 Name  Address   <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page **\$512.47**

Grand Total of all Schedules 1B  
(Complete on last page of Schedule) **\$1,509.09**

Enter this total  
on line 8a of  
Summary Page



**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150695  
2. Committee Name Friends of Randy Badger

**- USE A SEPARATE SHEET FOR EACH EVENT -**

3. Date Event Was Held <u>9/16/14</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>25</u>	5. Type of Fund Raising Activity <u>Picnic in The Park</u>	6. Address and Name (if any) of the place where the activity was held. <u>Frankenlost Twp Delta Rd Park</u> <input type="checkbox"/> Private Residence
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7. Total Contributions 371.00  
8. Other Receipts —  
9. Gross Receipts (Add lines 7 and 8) 371.00  
10. Total Cost of Event 298.18  
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11.  Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.